

IAPO4Rec'd PCT 19 JUN 2008 PC

Attorney Docket: 821-66



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Max Segerljung et al.

EXAMINER

McGowan, Jamie Louise

SERIAL NO.: 10/521,142

GROUP ART UNIT: 3671

FILED

: January 13, 2005

DATE: June 17, 2008

: A SECURING DEVICE

MAIL STOP AMENDMENT Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL FORM

Sir:

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Transmitted herewith is an amendment in the above-identified application.

- [X] Small entity status of this application under 37 C.F.R. §§1.9 and 1.27 has been established by a verified statement previously submitted.
- A verified statement to establish small entity under 37 C.F.R. §§1.9 and 1.27 is enclosed.
- No additional fee is required.

For	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate (Small Entity)	Addit. Fee	Rate	Addit. Fee
TOTAL CLAIMS*	27	20	7	x 25 =	\$0	x 50 =	\$175.00
INDEPENDENT CLAIMS	1	3	0	x105 =	\$0	x210 =	\$0.00
[] First Presentation of Multiple Dep. Claim				185		385	\$0 > 0

TOTAL:

175.00

The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on June 17, 2008.

Dated: June 17, 2008

06/23/2008 GFREY1 00000043 10521142

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175.00 OP

^{*} If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.

^{**} If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

^{***} If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

- [] Please charge Deposit Account No. <u>04-1121</u> in the amount of \$___. Two (2) copies of this sheet are enclosed.
- [X] A check in the amount of \$ 175.00 is enclosed.
- [X] Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. §§1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. <u>04-1121</u>. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. <u>04-1121</u> therefor. A DUPLICATE OF THIS SHEET IS ENCLOSED.

Respectfully submitted,

Zeorge M. Kaplan Reg No. 28,375

Attorney for Applicant(s)

DILWORTH & BARRESE, LLP 333 Earle Ovington Blvd. Uniondale, NY 11553 (516) 228-8484 JUN 1 9 2008 Please charge Deposit Account No. 04-

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